

STATE OF NEBRASKA

DEPARTMENT OF INSURANCE

Robert G. Lange

Director



December 18, 1995

CB-90

E. Benjamin Nelson
Governor

BULLETIN

TO: ALL PROPERTY & CASUALTY COMPANIES

ATTENTION: EXECUTIVE OFFICER

SUBJECT: RATE, RULE , AND FORM FILINGS

The Nebraska Department of Insurance is upgrading its filing system. We are installing electronic equipment that will process your incoming filings faster. New equipment will increase our accuracy in both filing and locating records.

Physical changes will be incorporated that will also allow us to locate records more quickly. This will help us provide better service to both you and the public.

Our Property & Casualty policy, manual, and rate files were completely purged in 1980 by requiring filers to provide us with new copies of documents that had been previously approved and that were still being used. This was a time-consuming and costly project for all of us.

Since that time, during the past fifteen years, many filers have not indicated all of the policy forms, rates, and manual pages superseded by current filings. As a result, we have obsolete material in our files and no way to identify this material. In order to remove all of the obsolete material and bring our files up-to-date, we have revised a few of our tools and procedures which will assist all of us.

Attached as Exhibit A is the coding we will use to determine under what category material approved for your company will be filed. We are adding six new categories and eliminating four others. Using these categories, we are requesting that you merely file lists with us this time rather than all of the pages.

-MORE-

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Please use a heading for each list that conforms to the Filing Headings listed on Exhibit A. If you have several programs under a filing heading, please include a subheading naming the program. As an example, a filer may have three Commercial Package Programs. Separate lists should be provided for each program. Examples would be:

Commercial Package	Commercial Package	Commercial Package
Commercial Package Program	Businessowners Program	Large Retail Program
Forms	Forms	Forms

Please provide one list for forms and a separate list for manual rule and rate pages.

Anything not included on your list will not appear in our files as approved. If our files do not contain an approved copy of a form or page on your list, we will subsequently write you for a copy bearing our stamp of approval.

You do not need to list forms or manual pages that you are approved to use because of being a member or subscriber of an Advisory Organization. In order to provide us with this information, please complete the attached form identified as Exhibit B, Nebraska Filing and Affiliation Form, to identify your use of Advisory Organization policy forms, manual rules, and loss costs. **Note:** You must still provide us with rate pages indicating your loss cost multipliers, minimum premiums, and all other documents not filed for you by the Advisory Organization.

We are continuing our procedure of allowing you to designate a lead company, if you are a member of a group of companies. This allows you to file one copy for our records rather than multiple copies (one for each company). Please complete Exhibit C, if you are part of a group of companies and wish to designate a lead company.

The final attachment is Exhibit D, which is a schedule we are requesting you to follow so we can implement an orderly transition program. If you file for a single company, please file in the month indicated. If you are a group of companies and use a lead company, we request that you file for all the members of your group in the month designated for the lead company.

Questions concerning this bulletin may be directed to Don Deal, Administrator of the Property & Casualty Division, at (402) 471-2201.

ROBERT G. LANGE
Director of Insurance

EXHIBIT A

FILING HEADINGS

<u>CODE NUMBER</u>	<u>LINES OF INSURANCE</u>	<u>CODE NUMBER</u>	<u>LINES OF INSURANCE</u>
1	Correspondence	1-540	Mobile Home and
1-100	Commercial Lines Property		Mobileowners
1-150	Personal Lines Property	1-600	Crop Hail
1-200	Commercial Inland Marine	1-610	Workers' Compensation
1-250	Personal Inland Marine	1-620	Crime (Burglary and Theft)
1-300	Commercial General Liability	1-630	Fidelity & Surety
1-330	Personal Liability	1-650	Glass
1-340	Professional Liability	1-660	Boiler and Machinery
1-341	Medical Malpractice	1-700	Commercial Package
1-342	Directors and Officers	1-800	Aircraft
1-343	Lawyers Professional	1-830	Mortgage Guaranty
1-380	Commercial Umbrella and	1-840	Title
	Excess Liability	1-850	Credit Property
1-390	Personal Umbrella and	1-860	Credit Unemployment
	Excess Liability	1-880	Credit
1-400	Commercial Auto including	1-900	Auto Warranty
	Motorcycle and Recreational	1-910	Homeowners Warranty
	Vehicle	1-920	Home Equipment Warranty
1-450	Personal Auto	1-930	Prepaid Legal
1-460	Boatowners	1-940	Financial Guaranty
1-500	Homeowners	1-950	Miscellaneous including
1-505	Combination Homeowners/		Flood
	Auto	1-970	Accord Forms
1-510	Homeowners with Business	1-975	All Programs
1-520	Farm Monoline & Package	1-980	All Personal Lines
1-530	Other Dwelling Package	1-990	All Commercial Lines
	Policies	1-1000	Risk Retention

EXHIBIT B INSTRUCTIONS

NEBRASKA FILINGS AND AFFILIATION SUMMARY INSTRUCTIONS

This form must be completed by every company licensed to write property and casualty insurance in Nebraska, except county mutuals. Companies writing reinsurance only can complete the form by stating “reinsurance only.”

Where two or more companies utilize common underwriting facilities (as is the case with most large company groups), one form shall be completed to include all companies in the group. Where separate underwriting units are used, a separate form should be completed for each underwriting unit.

This form will be the key to our filing system and it is important that it be completed correctly. This form will enable us to determine what advisory organization programs you are using and will replace the need for you to file their manuals and forms with us.

Because of dissimilarities between companies and groups, we are specifying the format of the Nebraska Filing and Affiliation Summary, rather than providing a form to be completed. Please photocopy this form so you can use it now and send us a new one in the future if you change your affiliations.

Lines of Insurance and Trade Name (If Applicable):

In this space, enter the lines of business that are written by the company. See Exhibit A, Filing Headings, for a general breakdown of lines and the order in which they should be listed. When preparing this form, include the code number opposite the heading as this will be our filing number.

There will commonly be situations where a company finds that it has several similar or dissimilar programs all coming under one of our filing headings. As a general rule, list programs separately under our general heading for the following reasons:

- (1) If you have an extensive amount of material applying uniquely to a program(s);
- (2) If a program has a separate manual (**Exception:** Your CMP programs should not be divided simply because they are rated out of several manuals); or
- (3) If you utilize different trade names; i.e., Protection-Pak or Business Custom Policy.

You would not generally wish to separate programs if all they have are minor differences in forms, rates or dividends unless the differences necessitate a considerable filing volume. We will also generally not separate exceptions to advisory organization programs and you should not separate programs falling under a single heading unless your filing volume will be substantial; i.e., greater than 20 or 30 pages.

Following is an example for a company writing automobile and automobile warranty coverage only is shown:

1-400 Commercial Auto

1-450 Personal Auto

1-900 Auto Warranty

A. Executive Policy (New Cars)

B. Employee Policy (Used Cars)

This example indicates the company has one commercial auto program and one personal auto program. Neither has a trade name. (If they are advisory organization programs, this will be shown in another column on the form under Affiliations). The example also shows us they have two auto warranty insurance programs: one for new cars, and one for used cars.

If a few extra words will help explain the intent of your program better, insert them under this heading. If you feel a detailed explanation is necessary, add footnotes.

Filing Affiliations; Rates/Loss Costs - Rules - Forms:

Under each of the three subheadings, indicate whether the company filings are Advisory Organization (abbreviate the Advisory Organization name) or independent (ind.) if you file independently.

Statistical Agent:

Enter the name of the statistical agent used for each line of insurance. If you have two programs in a line and statistics are reported to different agents, or not reported at all for one of the programs, indicate this clearly.

EXHIBIT B

NEBRASKA FILING & AFFILIATION SUMMARY

COMPANY NAME: _____

<u>Lines of Insurance and Trade Name (If Applicable)</u>	<u>Companies Writing</u>	<u>Affiliations</u>			<u>Statistical Agent</u>
		<u>Rates/ Loss Costs</u>	<u>Rules</u>	<u>Forms</u>	

1 - Correspondence

EXHIBIT C INSTRUCTIONS

DESIGNATION OF LEAD COMPANY

Group Name:

This form is completed for a company group that wants to designate a lead company. If your company is not a member of a group just fill your company name in here and leave the rest of the form blank.

Name of Lead Company:

Enter the name of the lead company in your group. Filings that pertain to more than one company in the group will be filed in our office under the lead company name. This form will tell us to which companies the filing applies.

Name of All Other Companies in Group:

List in alphabetical order all of the other companies in your group to which this form applies.

This procedure allows you to file only one copy for our retention, rather than one copy for each company. Sometimes the rates will vary even though all the forms are identical. In those cases, we will need a rate page for each company.

EXHIBIT C

DESIGNATION OF LEAD COMPANY

Group Name: _____

Name of Lead Company: _____

Names of All Other Companies in Group: _____

EXHIBIT D

By January 31	All Affiliation Forms All Lead Company Designations
By February 28	All companies whose names start with the letters “A & B”
By March 31	All companies whose names start with the letters “C, D, & E”
By April 30	All companies whose names start with the letters “F & G”
By May 31	All companies whose names start with the letters “H, I, J, & K”
By June 30	All companies whose names start with the letters “L & M”
By July 31	All companies whose names start with the letters “N & O”
By August 31	All companies whose names start with the letters “P, Q & R”
By September 30	All companies whose names start with the letter “S”
By October 31	All companies whose names start with the letters “T, U & V”
By November 30	All companies whose names start with the letters “W & X”
By December 31	All companies whose names start with the letters “Y & Z”